

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	8/20/01
FORMALITY REVIEW	TA	361113	9-18-01
RESPONSE FORMALITY REVIEW	HC	712	02-01-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/25/01
2	✓
3	✓
4	✓
5	✓
6	✓
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40	✓
41	0
42	0
43	0
44	✓
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49	
50	✓

Claim	Date
Final Original	
51	✓
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59	✓
60	✓
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67	✓
68	0
69	✓
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77	✓
78	0
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

301  
 102/01/02  
 361113  
 9-18-01